## City of Aberdeen Façade Improvement Application

Please return your completed application with all supporting documents to:

Facade Improvement Program City of Aberdeen Department of Planning and Community Development 60 North Parke Street Aberdeen, Maryland21001 410-272-1600 ext. 216

Fax: 410-273-7402

APPLICATIO	ON CHECKLIST
Completed application form Photographs (color) of existing conditi Conceptual idea of improvements or at Copy of current Harford County/ City occupying the building Two contract estimates/bids attached to	rchitectural services rendered Business License for all businesses
Please check one and provi	ide the necessary documents:
Property Deed	Business License
Paid Municipal Tax Bill	Business Owner Permission Form
Insurance Certificate	
This application is for assistance to:	
Name of Business:	
Business Address:	
Business Phone Number:	
SECTION A. BUILDING OWNERSHIP INF	ORMATION (Only if different from applicant)
Property Owner's Name:	
Property Owner's Address	
Property Owner's Phone Number:	<del></del>

## Please note:

• There can be no liens other than mortgages against the Applicant's property. All payments to the City of Aberdeen and other government entities must be current (taxes, water, etc).

- Projects must conform to applicable building codes, zoning regulations, and/or requirements for public accessibility. Other conditions may apply.
- Applicant is responsible for obtaining appropriate building permits, obtaining bids for construction activity, and must submit any state license numbers that apply to the work and agree to an inspection of the work by the City of Aberdeen.
- Applicant is responsible for submitting design drawing to the Aberdeen Architectural Review Committee (if applicable).

**Instructions:** Applicants must answer all items; incomplete applications will be returned. Any items which do not apply to your project should be marked "N/A".

SECTION B. PROPERTY INFORMATION
1. Number of businesses occupying the building:
2. Number of vacant commercial units in the building:
3. How long have these units been vacant:
4. Assessed value of the property per Maryland Dept. of Assessment & Taxation: \$
5. Year Built:
6. Gross area of building:
7. Tax ID #
8. Current Annual Property Taxes
9. Are there any outstanding debts (mortgages, encumbrances, liens, attachments) on the property? Yes_No
If "Yes", please indicate all secured interests in this property.
If necessary, attach a separate page to document additional items.
10. First Mortgage Holder Name:
11. Address:
12. Amount of Mortgage:
13. Date of Mortgage:
14. Second Mortgage Holder Name:
15. Address:
16. Amount of Mortgage:

17. Date of Mortgage: \_\_\_\_\_

## SECTION C. PROJECT INFORMATION

Please describe the type of improvements you propose to make to the building façade or interior. Include a
brief description of all other improvements (use additional sheets, if necessary).
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Total Project Cost: \$
Source of Funds:
Grant Request in the amount of:
Matching Fund obtained through:
Have you sought architectural assistance? Yes No
If yes, please attach drawings, renderings and plans.
Firm or individual's Name, Address, and Phone #
Please list the names of all contractors who provided an estimate and attach copies of all estimates
Firm or Individual's Name, Address, and Phone #
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Estimated time of project completion?

## APPLICANT CERTIFICATION

I/we certify that all information provided in the application is accurate and that I/we will complete a facade improvement project in accordance with plans approved by the City of Aberdeen. Upon notification that my/our project is approved for the Façade Improvement Program Grant, I/we will sign a participation agreement authorizing the City of Aberdeen to encumber funds for my/our project, and stipulating that I/we will abide by all program requirements. I further agree that at the conclusion of the facade improvements to maintain the completed project. I/we understand there will be no alterations of the completed work without approval from the City of Aberdeen.

Applicant(s) Signature(s):		
	Date:	
	Date:	